

## HAZARDOUS ANIMALS AND PLANTS

Venomous Snakes – Adders, burrowing asps, vipers, cobras, and cat snakes are present countrywide; some have potentially lethal venom. If bitten, seek urgent medical attention. Wash venom from eyes immediately!

Prevention – Do not handle *any* snake; avoid walking barefoot.

Centipedes, Millipedes, Solifugids, Bees, Ants, Wasps, and Blister/Bombardier/Rove Beetles – Abundant countrywide; none with deadly venom but can inflict painful bites, stings, or secrete fluids that can blister skin. Seek medical attention if bitten or stung.

Prevention – Shake out boots/bedding/clothing prior to use; never walk barefoot; avoid sleeping on the ground.

Scorpions – Numerous countrywide; some have potentially lethal venom. Seek medical attention if stung.

Prevention – Shake out boots/bedding/clothing prior to use; never walk barefoot; avoid sleeping on the ground; use caution when entering bunkers or abandoned buildings.

Marine Animals – Sharp corals and man-eating sharks, venomous seasnakes, rays, fish, starfish, shellfish, jellyfish, anemones, sea nettles/urchins are abundant in coastal waters. Seek medical attention if stung/bitten.

Prevention – Swim at approved beaches; do not handle.

Hazardous Plants – Thorny plants that can puncture skin, produce rashes, and/or cause infections are numerous countrywide. Burning some plants can cause skin rashes and lung damage. Some plants cause abnormal behavior/poisoning if chewed/eaten. Seek medical attention if injured or poisoned from plants.

## HAZARDOUS ANIMALS AND PLANTS (Continued)

Prevention – Do not touch, chew, eat, or burn unfamiliar plants; use clothing as a protective barrier for skin; wash contaminated skin/clothing after contact.

## HIGH ELEVATIONS

Operations at 6,000 feet can impact unit and individual effectiveness.

Signs of altitude sickness are headache, nausea, vomiting, dizziness, fatigue, irritability, coughing.

Acclimatization:

- Staged Ascent – Ascend to moderate altitude (5,000–8,000 feet), and remain there for 3 days before ascending higher.
- Graded Ascent – Limit daily altitude to allow partial acclimatization. Spend 2 nights at 9,000 feet, and limit to no more than 1,000 feet per day above each night's sleep.

Treatment – The preferred method to treat any high altitude illness is to evacuate the individual to a lower altitude. See GTA 08-05-060, [A Soldier's Guide to Staying Healthy at High Elevations](#).

## DISTRIBUTION UNLIMITED

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## DEPLOYMENT HEALTH GUIDE: OMAN



This country-specific guide should be used in conjunction with [GTA 08-05-062, U.S. Army Guide to Staying Healthy](#), and is intended to provide information that can help reduce your risk of Disease and Non-battle Injuries (DNBI) when deployed. This health threat and countermeasure information is based on the most current data available from U.S. Department of Defense medical agencies at the time of production. In addition to the information in this guide, you should also receive force health protection, health threat, and preventive medicine countermeasures training/briefings prior to and, as required, throughout the length of your deployment.

## OMAN OVERVIEW

Location – Oman is located in the Middle East, bordering the Arabian Sea, Gulf of Oman, and Persian Gulf, between Yemen and the United Arab Emirates (UAE). Oman is slightly smaller than Kansas.

Climate – Oman's arid subtropical climate is one of the hottest in the world. The coastal area around Muscat and the Musandum Peninsula has a mean summer temperature of 102° F. Moving southward along the coast humidity varies from 65 to 90° F and temperatures gradually cool. Winter temperatures are similar along the entire coast with extremes of 108° F and 13° F.

Rainfall – Average rainfall is 10 inches in the Hajar Mountains, 4 inches at Muscat, 1 inch on Masirah Island and 4 inches in the Dhofar Region.

Terrain – Rugged mountains in the North and South. The central region consists of the mostly uninhabited Rub' al Khali Desert with a barren coastline running along the eastern portion.

Forces of Nature – Extreme heat, high altitude, and sandstorms

## RISK ASSESSMENT

Oman is at **INTERMEDIATE RISK\*** for infectious diseases. Without force health protection measures, mission effectiveness will be adversely impacted.

\*Based on a combination of all major infectious diseases that occur in a country, the Armed Forces Medical Intelligence Center (AFMIC) assigns an **overall country risk level** of low, intermediate, high, or very high risk, as compared to other countries.

## INFECTIOUS DISEASES

### Food-borne and Water-borne Diseases

Consuming contaminated food, water, or ice

### Food-borne and Water-borne Diseases (Continued)

**Diarrhea, bacterial** – Possible attack rate of 11–50 percent per month if local food, water, or ice is consumed

- Threat – year-round; countrywide
- Symptoms – loose, watery or explosive bowel movements
- Recovery of 1–3 days with antibiotics

**Hepatitis A** – Less than 1 percent per month attack rate among unvaccinated personnel consuming local food, water, or ice

- Threat year-round; countrywide
- Symptoms – none to flu-like illness
- Severe, 1–4 weeks recovery, sometimes initially requiring hospitalization

Prevention – Consume only U.S. military-approved food, water, and ice; take **hepatitis A vaccine** if directed by medical authority.

### Vector-borne Diseases

A rare or undetermined number of cases could occur year round: **Crimean-Congo hemorrhagic fever** (tick-borne); **leishmaniasis** (cutaneous; sand fly-borne); **sandfly fever** (sand fly-borne); **Sindbis** (Ockelbo) **virus** (mosquito-borne).

Prevention – **DEET** on exposed skin; **permethrin-treated uniforms**; **permethrin-treated bed nets**

### Animal Contact Diseases

**Rabies** – Exposure to virus-laden saliva of an infected animal through a bite, scratch or breathing airborne droplets; risk is comparable to the U.S.

- Threat year-round, countrywide; primarily in rural areas
- Initial symptoms – pain, tingling, or itching from bite site, chills, fever, muscle aches
- Death likely in the absence of post-exposure prophylaxis

Prevention – Avoid all animals; if scratched or bitten, seek medical attention immediately; get preexposure and/or postexposure vaccinations if prescribed by medical authority.

### Animal Contact Diseases (Continued)

Others: **Q fever**

### Sexually Transmitted Diseases

**Gonorrhea/Chlamydia** – Unprotected sexual contact with infected person; potential attack rate of 1 to 50 percent

- Threat year-round; countrywide
- Symptoms (in men) – none to burning sensation when urinating or discharge
- Symptoms (in women) – none to burning sensation when urinating or increased vaginal discharge
- Mild; outpatient treatment

Others: **HIV/AIDS**, **hepatitis B**

Prevention – Abstinence; latex condoms; not sharing needles

### Water Contact Diseases

**Leptospirosis** – Wading, swimming, other contact with water/mud contaminated with infected animal urine; disease is assessed as present, but levels are unknown.

- Threat year-round
- Symptoms – fever, chills, nausea
- Hospitalization of 1-7 days

Prevention: Do not swim/wade in unapproved water; wash skin and clothing after exposure to freshwater streams/ponds.

Others: **Schistosomiasis**

## ENVIRONMENTAL RISKS

### Short-term health risks

- Water containing raw sewage
- Runoff containing fecal pathogens
- Food contaminated with fecal pathogens

### Long-term health risks

Chemical contamination of food or water